Name in Full Maria Butler

Certificate of Death

Died at Town Whitehead County St. Marys MARYLAND

Date 189 9 Month Aug. Day 9 Age Y. 33 M. 10 D. 19 Native of Md Occupation Housewife

~~Male~~ ~~White~~ Married ~~Widow~~ ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living 4

Husband ~~Wife~~ of Bansey Butler

Father's Name Benjamin Butler Mother's Name Rose Brown

Cause of Death Primary Phthisis 22a How long sick 6 years

Immediate Mitral Stenosis ~~Accident, Suicide, Homicide~~

Reported by Robt. V. Palmer M.D.

Address Palmers M.D.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU

Name in Full Lum Chapman

Certificate of Death

Died at Town Hollywood County St Marys MARYLAND

Date 1899 Month Aug Day 1 Age Y. 74 M. D. Native of Md Occupation Farmer

Male ~~White~~ Married ~~Widow~~ ~~Divorced~~

~~Female~~ Colored ~~Single~~ ~~Widower~~ Number of children living 8

Husband of Wife

Father's Name

Mother's Name 19

Cause of Death Primary Congestion Chill

Immediate

How long sick 24 hrs

Accident, Suicide, Homicide

Reported by J. D. King M.D.

Address Oakville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65868

Name in Full — Certificate of Death

Richard Long

Died at Town: Cremona — County: St. Marys — MARYLAND

Date 189 9 — Month: Aug. — Day: 15 — Age: Y. 79 M. D. — Native of: St. Marys — Occupation: Farmer

~~Male~~ / ~~Female~~ — ~~White~~ / ~~Colored~~ — ~~Married~~ / ~~Single~~ / ~~Widow~~ / Widower / ~~Divorced~~ — Number of children living 4

Husband of ~~wife~~

Father's Name: Don't Know — Mother's Name: Don't Know

Cause of Death — Primary: Rheumatism 26 — How long sick: 1 Year

Immediate: Organic heart disease — ~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by: Jno. R. Morgan

Address: Mechanicsville, Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name In Full

Certificate of Death

Richard Long

Died at Mar Town Laurel Grove County St Marys Co. MARYLAND

Date 1899 Month 8 Day 15 | Age Y. 78 M. D. | Native of St Marys Co. | Occupation Farmer

Male ~~Female~~ White ~~Colored~~ ~~Married~~ ~~Single~~ ~~Widow~~ Widower ~~Divorced~~ Number of children living 5

Husband ~~Wife~~ of Mary J. Buckler

Father's Name dont know | Mother's Name dont know

Cause of Death: Primary Heart disease 57 | How long sick 6 or 8 months

Immediate | ~~Accident, Suicide, Homicide~~

Reported by Sylvester Adams

Address Mechanicsville Maryland

Must be signed by physician, if any in attendance, otherwise coroner, undertaker or minister.

LIBRARY BUREAU, 79888

Attended by Dr. No Dr in Attendance

of .....

Seen by Coroner .....

of .....

Information contained in this certificate received

from Geo. H. Long

of Mechanicsville Md

Name in Full Elinora Price

Certificate of Death

Died at Hillsville (Town) St Mary's (County) MARYLAND

Date 1899 Month Aug. Day 3 Age Y. 10 M. D. Native of Md Occupation

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children living~~

Husband of Wife

Father's Name Herb Price

Mother's Name Mary Jane Price

Cause of Death: Primary Typhoid Fever

Immediate

How long sick 2 weeks

Accident, Suicide, Homicide

Reported by J. O. Kerry M.D.

Address Oakville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full Robt, Somerville

Certificate of Death Somerville

Died at Town Howgrove County St Mars Co MARYLAND

Date 1899 Month August Day 19 Age Y. 23 M. D. Native of St Mary Occupation Farmer

Male ~~White~~ ~~Married~~ ~~Widow~~ Divorced

~~Female~~ Colored Single ~~Widower~~ ~~Number of children living~~

Husband of Wife — — —

Father's Name John Somerville Mother's Name Alice Somerville

Cause of Death Primary Remittent Fever 1 How long sick

Immediate Intestinal Hemorrage ~~Accident, Suicide, Homicide~~

Reported by Thos Smith

Address Leonardtown Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 68968

Name in Full

Certificate of Death

Bob Thompson

Died at Town Leonardtown County St Mary MARYLAND

Date 1899 Month Aug Day 28 Age Y. 60 M. D. Native of St Mary Occupation Farmer

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 6

Husband of Wife — — — —

Father's Name — — — Mother's Name — — —

Cause of Death Primary Erysipelas 125 How long sick 5 days

Immediate Exhaustion Accident, Suicide, Homicide

Reported by Thos Lynch

Address Leonardtown

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Marie Turner

Certificate of Death

Died at Town Oakley County St Mary S MARYLAND

Date 189 9 Month Aug. Day 6 Age Y. M. D. 5-9 Native of Md Occupation —

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband of Wife —— 82

Father's Name Edward Turner

Mother's Name Bettie Turner

Cause of Death

Primary Epileptic Inquiry Cholera Infantum

Immediate Cholera Infantum

How long sick 18 hours

~~Accident, Suicide, Homicide~~

Reported by Robt. V. Palmer M.D.

Address Palmers M.D.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968